



Housing LIN

Connecting people, ideas and resources

Assessment of need for specialised housing and accommodation for older people in Richmond

Report for the London Borough of Richmond

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Confidential

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Housing Learning & Improvement Network

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1. Introduction

- 1.01 This is a report from the Housing Learning and Improvement Network (Housing LIN)¹ in response to a brief from the London Borough of Richmond (LBR).
- 1.02 LBR has commissioned Iceni/Housing LIN to undertake an assessment of need for specialised housing and accommodation for older persons to 2039.
- 1.03 This report includes consideration and analysis of:
- Demographic evidence relating to the older population in Richmond.
 - Evidence in relation to the health, social care and socioeconomic profile of the older population in Richmond.
 - Evidence in relation to the current supply in Richmond of specialised housing and accommodation for older people.
 - Evidence from the Council in relation to estimates of need for accommodation and care for older people.
 - Quantitative estimates of future need for specialised housing and accommodation for older people to 2039.
- 1.04 A previous estimate of need for specialised housing and accommodation for older people was produced by Three Dragons' consultants in 2017 for the Greater London Authority. This assessment identified that Richmond upon Thames had a need to increase the number of units of specialised housing for older people by approximately 135 units per year for each year to 2029, in order to meet the overall net need requirement. Of these 135 units required per year:
- 105 were for private sale
 - 30 were for intermediate sale
 - 0 were for affordable rent
- 1.05 In light of these previous estimates, this report produces a more localised assessment of need based on up-to-date population data and localised intelligence for the London Borough of Richmond.

¹ [The Housing Learning & Improvement Network](#)

2. Contextual evidence for specialised housing and accommodation for older people in Richmond upon Thames

Demographic profile: Population aged 65+ of Richmond upon Thames

- 2.01 Population data for Richmond is analysed in relation to the over-65 population and its Chartered Institute of Public Finance and Accountancy (CIPFA) comparator local authorities.
- 2.02 The CIPFA comparators are 15 local authorities that are similar in demographic and socio-economic makeup to Richmond. This is based on the CIPFA *Nearest Neighbours* model², which takes into account factors such as:
- Population.
 - Proportion of the population aged 75-85.
 - Proportion of households in social rented accommodation.
 - Standardised mortality ratios for all inhabitants.
- 2.03 Using 2018-based ONS population projections data³, and population data supplied by Icen and JGC, the population of Richmond and its CIPFA comparators have been projected for the years 2021, 2025, 2030, 2035 and 2039.
- 2.04 Tables 1 and 3 show the population projections for Richmond and its CIPFA comparators up to 2039 for the over-65 and over-75 populations respectively, and tables 2 and 4 show the percentage change for the populations relative to the 2021 populations for the over-65 and over-75 populations respectively.

² Chartered Institute of Public Finance and Accounting – Nearest Neighbours model: <https://www.cipfa.org/services/cipfastats/nearest-neighbour-model>

³ 2018-based subnational principal population projections for local authorities and higher administrative areas in England

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Table 1. Population figures for over-65s, for Richmond upon Thames and its CIPFA comparators, projected from 2021 to 2039.

Authority	Over-65 population				
	2021	2025	2030	2035	2039
Richmond upon Thames	32,599	35,589	40,445	45,124	48,907
Barnet	59,707	65,508	74,293	83,835	90,727
Bexley	41,638	44,001	48,278	52,443	54,820
Bromley	58,832	61,662	67,414	72,972	76,330
Croydon	55,731	61,369	70,858	78,752	83,323
Ealing	47,168	51,649	58,155	64,619	69,082
Enfield	46,167	50,171	56,855	63,357	67,537
Harrow	41,727	45,186	49,755	53,795	56,520
Havering	47,166	49,364	53,038	56,730	58,929
Hillingdon	42,976	46,683	52,371	57,665	61,256
Hounslow	34,997	38,508	43,536	48,436	52,057
Kingston upon Thames	25,509	27,680	30,944	34,350	37,015
Merton	27,112	29,030	32,624	36,212	38,564
Redbridge	40,163	43,675	48,782	53,951	57,743
Sutton	32,375	34,378	37,944	41,431	43,771
Wandsworth	32,900	35,805	40,929	46,511	50,485
Comparator Average	41,673	45,016	50,389	55,636	59,191
England	10,135,622	11,039,983	12,237,747	13,296,314	14,436,341

Source: Icen/JGC/ONS 2018-based subnational principal population projections

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Table 2. Percentage change in the over-65 population of Richmond upon Thames, for projections up to 2039, in relation to its CIPFA comparators.

Authority	% changes in the over-65 population (measured in relation to the 2021 population)			
	2025	2030	2035	2039
Richmond upon Thames	9.2%	24.1%	38.4%	50.0%
Barnet	9.7%	24.4%	40.4%	52.0%
Bexley	5.7%	15.9%	26.0%	31.7%
Bromley	4.8%	14.6%	24.0%	29.7%
Croydon	10.1%	27.1%	41.3%	49.5%
Ealing	9.5%	23.3%	37.0%	46.5%
Enfield	8.7%	23.2%	37.2%	46.3%
Harrow	8.3%	19.2%	28.9%	35.5%
Havering	4.7%	12.4%	20.3%	24.9%
Hillingdon	8.6%	21.9%	34.2%	42.5%
Hounslow	10.0%	24.4%	38.4%	48.7%
Kingston upon Thames	8.5%	21.3%	34.7%	45.1%
Merton	7.1%	20.3%	33.6%	42.2%
Redbridge	8.7%	21.5%	34.3%	43.8%
Sutton	6.2%	17.2%	28.0%	35.2%
Wandsworth	8.8%	24.4%	41.4%	53.4%
Comparator Average	8.0%	20.9%	33.5%	42.0%
England	8.9%	20.7%	31.2%	42.4%

Source: IcenI/JGC/ONS 2018-based subnational principal population projections

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Table 3. Population figures for over-75s, for Richmond upon Thames and its CIPFA comparators, projected from 2021 to 2039.

Authority	Over-75 population				
	2021	2025	2030	2035	2039
Richmond upon Thames	14,955	17,550	19,531	21,731	24,181
Barnet	28,634	32,428	36,081	40,959	45,775
Bexley	20,909	22,596	23,505	25,708	28,387
Bromley	28,950	32,078	33,453	35,865	39,108
Croydon	25,271	28,218	31,482	36,064	41,202
Ealing	21,143	23,838	27,187	30,823	34,242
Enfield	22,177	24,195	26,332	29,664	33,410
Harrow	19,655	21,696	24,084	27,120	29,688
Havering	23,433	25,397	26,335	28,405	30,717
Hillingdon	20,441	22,681	24,687	27,843	30,997
Hounslow	15,078	17,159	19,478	22,160	24,585
Kingston upon Thames	11,963	13,656	15,030	16,705	18,427
Merton	12,377	13,713	14,849	16,504	18,439
Redbridge	18,285	20,169	22,389	25,328	28,109
Sutton	15,337	17,017	18,239	19,961	21,902
Wandsworth	14,741	16,738	18,473	20,821	23,562
Comparator Average	19,584	21,820	23,821	26,604	29,546
England	4,562,693	5,372,469	5,819,031	5,819,031	7,494,397

Source: Icenii/JGC/ONS 2018-based subnational principal population projections

Table 4. Percentage change in the over-75 population of Richmond upon Thames, projected to 2039, in relation to its CIPFA comparators.

Local authority	% change in the over-75 population (measured in relation to the 2021 population)			
	2025	2030	2035	2039
Richmond upon Thames	17.4%	30.6%	45.3%	61.7%
Barnet	13.2%	26.0%	43.0%	59.9%
Bexley	8.1%	12.4%	23.0%	35.8%
Bromley	10.8%	15.6%	23.9%	35.1%
Croydon	11.7%	24.6%	42.7%	63.0%
Ealing	12.7%	28.6%	45.8%	62.0%
Enfield	9.1%	18.7%	33.8%	50.7%
Harrow	10.4%	22.5%	38.0%	51.0%
Havering	8.4%	12.4%	21.2%	31.1%
Hillingdon	11.0%	20.8%	36.2%	51.6%
Hounslow	13.8%	29.2%	47.0%	63.1%
Kingston upon Thames	14.2%	25.6%	39.6%	54.0%
Merton	10.8%	20.0%	33.3%	49.0%
Redbridge	10.3%	22.4%	38.5%	53.7%
Sutton	11.0%	18.9%	30.1%	42.8%
Wandsworth	13.5%	25.3%	41.2%	59.8%
Comparator Average	11.4%	21.6%	35.8%	50.9%
England	2.6%	17.7%	27.5%	64.3%

Source: Icen/JGC/ONS 2018-based subnational principal population projections

2.05 In Richmond upon Thames, it is estimated that, by 2039, there will be an increase of c.50% in the over-65 population and a c.62% increase in the over-75 population.

Health and social care context

2.06 Average life expectancy in Richmond at birth is 84.5 years⁴, which is higher than the London average life expectancy of 82.8 years, and the average life expectancy for England of 81.5 years⁵.

2.07 Average healthy life expectancy in Richmond upon Thames at age 65 is 13.5 years⁶, compared to 10.5 years for London and 10.9 years for England.

2.08 The demand for residential and nursing care is partly influenced by the prevalence of dementia and frailty amongst the local older population. Table 5 shows the prevalence of dementia in Richmond⁷.

⁴ Public Health England: Local Authority Health Profile – [Richmond upon Thames](#)

⁵ ONS: 2020 National life tables – England

⁶ ONS: 2019 Health state life expectancy at birth and at age 65 years by local areas, UK

⁷ NHS Digital, Recorded Dementia Diagnoses publications, December 2020 – accessed via PHE: [Dementia Profile](#)

Table 5. Number of people 65+ with dementia and dementia prevalence as a percentage of the total 65+ population.

Area	Number of people 65+ with dementia in 2021	Percentage of people 65+ with dementia out of total 65+ population in 2021	Projected annual growth rate	Projected number of people 65+ with dementia to 2039
Richmond	1,412	4.01%	1.09% p.a.	1,716
London region	46,719	4.17%	0.35% p.a.	49,752
England	422,973	3.97%	2.84% p.a.	700,213

Source: NHS Digital, Recorded Dementia Diagnoses publications (2020) & Wittenberg et al (2019)

- 2.09 Note that the figures for projected number of people 65+ with dementia in 2039 is based on projected growth rates from Wittenberg et al (2019)⁸.
- 2.10 The prevalence of dementia amongst the 65+ population in Richmond in 2021 is slightly lower than the London average but slightly higher than the prevalence for England. This indicates that there is likely to be an increasing need for housing and care services that can meet the needs of people living with dementia.
- 2.11 Given the ageing population, this is likely to have a significant impact on social care need with older people. The Council estimates in their accommodation-based care commissioning research that there is a likely increase in the number of people with a limiting long-term illness. This population group is expected to increase by 38% from 2019 to 2035⁹.

Income and socioeconomic context

- 2.12 Based on the 2011 Census, home ownership among over-65 households¹⁰ in Richmond was 76.6%¹¹, which is below the average English home ownership rate of 83.7%. The home ownership rate includes outright ownership, ownership with a mortgage or loan and shared ownership.
- 2.13 The Income Deprivation Affecting Older People Index (IDAOPI)¹² score is a measurement of people over the age of 60 living in relative poverty; a higher score for a local authority implies a higher level of relative poverty. Richmond upon Thames' IDAOPI score is 9.4% and is ranked least deprived out of the 32 London Boroughs.

⁸ Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019–2040; Care Policy and Evaluation Centre, London School of Economics and Political Science

⁹ London Borough of Richmond; Accommodation-based care commissioning research

¹⁰ The unit of measurement is the Household Reference Person (HRP): defined as the individual taken to represent the household for statistical purposes. The HRP in this data is over-65 years of age.

¹¹ Office for National Statistics (2013). Tenure by occupation by age - Household Reference Persons. Nomis Table DC4604EW.

¹² Local Government Association: [IDAOPI score](#) – based on data from MHCLG

Existing specialised housing and accommodation for older people

- 2.14 Data from the Elderly Accommodation Counsel's (EAC)¹³ national database of older people's specialised housing and accommodation provision was reviewed to confirm the current supply across Richmond. This includes specialised social and private sector housing and accommodation for older people.
- 2.15 The following definitions of specialised housing and accommodation for older people are used:
- *Housing for Older People (HfOP)*¹⁴: Social sector sheltered and age-designated housing and private sector retirement housing. The most common types of Housing for Older people are:
 - *Sheltered housing*: These schemes typically offer self-contained accommodation for rent. They are usually supported by a part-time/visiting scheme manager and 24-hour emergency help via an alarm. There are often communal areas and some offer activities. Most accommodation is offered for rent, based on need, by local councils or housing associations. Usually for people aged 55+.
 - *Private sector retirement housing*: This is typically similar to sheltered housing, but it is usually built by private developers or in some cases by housing associations. Once all the properties have been sold, the scheme is usually run by a separate management company that employs the scheme manager and organises maintenance and other services. Usually for people aged 55+.
 - *Housing with care (HwC)* (often referred to as '*extra care housing*' when provided by housing associations and local authorities and '*assisted living*' by private sector providers). Housing with care is designed for older people, some with higher levels of care and support needs. Residents live in self-contained homes. It typically has more communal facilities and offers access to domestic support and on-site 24/7 personal care. Usually for people aged 55+ although the average age of residents is often 75 years or over (some schemes accommodate people under 55 with care needs).
 - *Residential care home*: A residential setting where a number of older people live, usually in single rooms, and have access to on-site care services. Personal care services include help with washing and dressing.
 - *Nursing care home*: Similar to a residential care home, but additionally providing personal care from qualified nurses. There will always be 1 or more qualified

¹³ Elderly Accommodation Counsel housing data (Q4 2019)

¹⁴ EAC - [HousingCare Glossary](#)

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nurses on duty to provide nursing care. These are sometimes called 'care homes with nursing'.

Tables 6 and 7 provide an overview of the aggregate number of units of specialised housing and accommodation for older people for all of the categories above.

Table 6. Current supply for all types of specialised housing for older people (HfOP) and housing with care (HwC) in Richmond upon Thames and for its CIPFA comparators.

Local Authority	HfOP (units)				HwC (units)			
	Sale / shared ownership	Rent	Total	Prev	Sale / shared ownership	Rent	Total	Prev
Richmond	290	1,033	1,323	41	0	66	66	4
Barnet	908	1,947	2,855	48	0	200	200	7
Bexley	1005	1363	2,368	57	50	74	124	6
Bromley	1320	2,269	3,412	58	40	191	388	13
Croydon	884	2,092	2,976	53	0	348	348	14
Ealing	298	1,917	2,215	47	0	75	75	4
Enfield	723	1,395	2,118	46	0	93	93	4
Harrow	726	1,024	1,750	42	48	47	95	5
Havering	738	960	1,698	36	0	195	195	8
Hillingdon	400	1,333	1,733	40	55	240	295	14
Hounslow	294	1,095	1,389	40	0	115	115	8
Kingston upon Thames	319	1,200	1,519	60	0	0	0	0
Merton	288	760	1,048	39	51	107	158	13
Redbridge	981	1,109	2,090	52	0	196	196	11
Sutton	637	1,409	2,046	63	57	112	169	11
Wandsworth	182	1,813	1,995	61	94	153	247	17
Comparator Average	625	1,420	2,033	49	25	138	173	9
England	151,683	432,391	584,074	58	13,629	46,176	59,805	13

Source: Elderly Accommodation Counsel (2019)

N.B. 'Prev' denotes prevalence of housing and care units per 1,000 people over-65 (HfOP) and over-75 (HwC).

Table 7. Current supply of residential and nursing care beds in Richmond upon Thames, and for its CIPFA comparators.

Local Authority	Residential care (beds)	Prev.	Nursing care (beds)	Prev.
Richmond	343	23	468	31
Barnet	1,272	44	1,306	46
Bexley	865	41	678	32
Bromley	524	18	1,020	35
Croydon	904	36	1,717	68
Ealing	266	13	1,121	53
Enfield	863	39	829	37
Harrow	388	20	639	33
Havering	591	25	1,087	46
Hillingdon	516	25	780	38
Hounslow	74	5	548	36
Kingston upon Thames	276	23	852	71
Merton	137	11	692	56
Redbridge	584	32	576	32
Sutton	381	25	819	53
Wandsworth	278	19	1,114	76
Comparator average	516	26	890	45
England total	209,154	46	216,227	47

Source: Care Quality Commission (2021)

N.B. 'Prev.' denotes prevalence rate – the number of bedspaces per 1,000 people over-75

London Borough of Richmond Accommodation-Based Care Commissioning research

2.16 The following commissioning intentions and priorities as set by the Council in its accommodation-based care commissioning research are relevant to this assessment of need:

- *Develop more extra care and supported living provision.*
- *Develop innovative and sustainable dementia friendly accommodation-based care.*
- *Focus on providing sufficient moderate support living options such as extra care and supported living as an alternative to residential care.*
- *Our focus is on supporting more people into extra care placements.*
- *Develop flexible, age friendly, and accessible accommodation-based solutions.*
- *We expect our supply need for residential and extra care units to increase by approximately 150 by 2035.*
- *We expect the need for council placed nursing care to increase by up to approximately 80-90 additional placements by 2035.*

Pipeline development: specialised housing and accommodation for older people

2.17 Table 8 below provides a list of planning application details for specialised housing and accommodation schemes for older people that either have a planning permission but are yet to be developed or that had been accepted in principle as at December 2021 (since April 2018).

Table 8. Specialised housing and accommodation for older people that either has a planning permission but is yet to be developed or had been accepted in principle as at December 2021

Status	Scheme name	Site address	Housing type	Number of units / bedspaces (gross)
Approval subject to s.106 agreement	Care Home – Cinnamon Care	Former Police Station, Station Road, Hampton, TW12 2AX	Care home	66
Permission granted – 16/09/2020	Extra care - Red and Yellow (developer)	Former Biothane Site, Melliss Avenue, Kew, TW9 4BD	Extra care	89
Permission is being sought on a revised scheme	-	The Stag Brewery, Lower Richmond Road, Mortlake, SW14 7ET	Nursing care and extra care	Up to 80 bedspaces, up to 150 units of extra care

Source: London Borough of Richmond planning portal. Number of units/bedspaces are shown 'gross', i.e. excluding any potential losses of units on these sites.

3. Estimate of need for specialised housing and accommodation for older people in Richmond upon Thames

- 3.01 The Housing LIN's SHOP@¹⁵ model has been used to estimate future need for specialised housing and accommodation for older people. This was originally developed with the Association of Directors of Adult Social Services (ADASS) and Elderly Accommodation Counsel for the Department of Health's Market Development Forum to support local authorities to forecast demand for older people's housing and accommodation.
- 3.02 The SHOP@ housing need model has been adapted over the last few years so that the approach refines the previous use of national generic 'benchmarks' to better estimate future need for specialised housing and accommodation for older people at local authority level.

Approach: considerations and assumptions

- 3.03 Data about the existing supply of specialised housing and accommodation for older people in Richmond is used as a 'baseline' of current provision (tables 6 and 7). This study does not include an assessment of any of this housing/accommodation therefore no assumptions are made about its future 'fitness for purpose'.
- 3.04 ONS 2018-based subnational population projections are used for relevant older populations in Richmond¹⁶. Based on evidence from the Housing LIN's advisory work with housing providers and local authorities, the following population bases are used for estimating future need for specialised housing and accommodation for older people, reflecting the typical average ages of moves to these types of specialised housing/accommodation:
- The over 75 population as the age benchmark in relation to the need for housing with care, residential care and nursing care. It should be noted that this is an 'average age' benchmark, and does not discount people aged under 75 years from needing housing with care.
 - The over 65 population as the age benchmark in relation to the need for specialised housing for older people (sheltered housing and retirement housing). It should be noted that this is an 'average age' benchmark, and does not discount people aged under 65 years from needing housing for older people.
- 3.05 Over 70% of households headed by a person aged over-65 are homeowners (para 2). Richmond is ranked lowest out of its London Borough comparator authorities in

¹⁵ www.housinglin.org.uk/SHOP

¹⁶ 2018-based subnational principal population projections for local authorities and higher administrative areas in England

terms of its IDAOP score, i.e. it has the lowest levels of relative poverty amongst people aged over 60 amongst its comparators. Based on this evidence it is assumed that estimated future need for specialised housing for older people will mirror current tenure patterns amongst households headed by a person over-65 in mainstream housing, i.e. it is assumed that c.75% of future need for specialised housing for older people will be for owner occupation/shared ownership. In relation to estimates of future need for housing with care, it is assumed that there will be a balance of 50%/50% need for owner occupation and social/affordable rent reflecting London Borough of Richmond's policy intent of commissioning additional extra care housing for its social care clients.

- 3.06 In terms of the health and social care profile of the older population in Richmond, evidence (paras 2.06 - 2.11) indicates that average healthy life expectancy is above the national average. The number of people aged over 65 with dementia is projected to increase in Richmond by 2039 to c.1,700 people. The incidence of dementia is a key factor affecting need for residential care and nursing care. Drawing on evidence from the Council's accommodation-based care commissioning research it is assumed that estimated future need for residential care and nursing care beds will be at least c.50% for dementia related needs.
- 3.07 Based on the Housing LIN's experience of local authority commissioning and placement funding practice, and from intelligence provided by the Council, it is assumed that up to 20% of placements into residential care could be substituted with living in housing with care (extra care housing).
- 3.08 Evidence in relation to the preferences of older people to move (i.e. 'downsizing'/'rightsizing') to types of housing/accommodation designated for older people is an influencing factor in estimating need for housing/accommodation. The Housing LIN has drawn on qualitative and quantitative research it has conducted with over 1,000 people aged over-55 over the last three years. In summary this evidence indicates:
- Older people are seeking wider choices in the range of housing and accommodation options that will facilitate independence, in some cases this will be a move to alternative accommodation, for others this is about adapting their current home and bringing in care/support.
 - Housing LIN research suggests that of those older people whom are interested in and willing to 'downsize'/'rightsizing':
 - c.50% are interested in moving to a form of specialised housing for older people, primarily retirement housing (for sale or for social/affordable rent), followed by housing with care (extra care housing).
 - c.50% are interested in moving to 'age friendly' (mainstream) housing that meets age related needs but is not age-designated specialised housing.
 - There is very limited interest in a move to residential care or nursing care as a choice of specialised accommodation; most moves to these types of

accommodation are ‘forced moves’ as a result of, for example, an acute health and/or care episode.

3.09 In relation to the impact of the Covid-19 pandemic, any assumptions based on emerging evidence are highly tentative given that the impact of the pandemic on the specialised housing and accommodation sector for older people is not yet clear. At this stage considerations based on tentative evidence could suggest in the medium to longer term:

- There is potential for a downward shift in the preference for the use of residential care.
- There is potential for a preference amongst older people to remain in their existing homes (whether owner occupiers or renters) with care if required.

3.10 An analysis has been undertaken that compares the current supply or ‘prevalence’ of different types of specialised housing for older people (older people’s housing for rent, older people’s retirement housing for sale), housing with care (extra care housing) for rent and for sale, residential and nursing care in Richmond with the CIPFA *Nearest Neighbour* comparator authorities¹⁷, along with the all-England averages for supply of older people’s housing and accommodation. This identifies how supply in Richmond compares to similar authorities and across England generally. This is summarised in tables 9,10 and 11.

Table 9. Prevalence rates (i.e. the number of units per 1,000 people aged 65+) Housing for Older People in Richmond upon Thames and the CIPFA comparator average and all-England prevalence rates.

Area	Prevalence of HfOP
Richmond	41
CIPFA comparator average	49
England	58

Table 10. Prevalence rates (i.e. the number of units per 1,000 people aged 75+) Housing with Care in Richmond upon Thames and the CIPFA comparator average and all-England prevalence rates.

Area	Prevalence of HwC
Richmond	4
CIPFA comparator average	9
England	13

Table 11. Prevalence rates of residential and nursing care in Richmond upon Thames and the CIPFA comparator average and all-England prevalence rates.

Area	Prevalence of Residential care	Prevalence of Nursing care
Richmond	23	31
CIPFA comparator average	26	45
England	46	47

¹⁷ <https://www.cipfastats.net/resources/nearestneighbours/>

3.11 The comparisons show that:

- For Housing for Older People, prevalence in Richmond is below both the English average prevalence rate and its CIPFA comparators' average prevalence rate.
- For Housing with Care, prevalence in Richmond is below both the English average prevalence rate and its CIPFA comparators' average prevalence rate.
- For residential care, Richmond upon Thames has a prevalence rate slightly below its CIPFA comparators' average prevalence, however is lower compared to the English average prevalence.
- For nursing care, Richmond has a prevalence rate below both its CIPFA comparators' average and the English average prevalence.

3.12 The contextual evidence set out above (paragraphs 3.03-3.09) is used as a basis for reasoned assumptions in relation to estimating need for specialised housing and accommodation for older people in Richmond to 2039. In relation to each of the types of specialised housing and accommodation for older people (as set out in paragraph 2.15) these assumptions are summarised below:

- Housing for Older People. Need is likely to increase as a consequence of: an increasing 65+ population; relative undersupply compared with its local authority comparators and England prevalence; relative undersupply of housing for older people for sale, compared to the supply of housing for older people for social rent, in the context of over 70% home ownership amongst over 65 households in mainstream housing (assuming most homeowners living in mainstream housing, who wish to do so, will seek to 'downsize' to specialised housing for older people that is for sale) ; research with older people indicating an interest in moving to housing suited to older people, although up to c.50% of need could be met through non 'age designated' housing.
- Housing with care. Need is likely to increase as a consequence of: significantly increasing 75+ population; significant relative undersupply compared to English and comparator local authority average provision; increasing prevalence of dementia related needs amongst the 75+ population; local authority intention to commission additional extra care housing, some as an alternative to residential care.
- Residential care. Need is likely to increase but any increase in need is limited by: relatively low numbers of older people being placed in residential care by the Council; the Council's policy intent to commission extra care housing, in part as an alternative to residential care; the potential for the impact of the Covid-19 pandemic to reduce demand (amongst local authority funded placements and self-funders).
- Nursing care. Need is likely to increase as a consequence of a significantly increasing 75+ population; significant relative undersupply compared to English and comparator local authority average provision; increasing prevalence of

dementia related needs amongst the 75+ population; local authority evidence of need for nursing care beds projected to increase to 2039.

3.13 Table 12 shows the anticipated likely need (prevalence rate) and the associated estimated need (units/bedspaces) for each type of specialised housing and accommodation for older people:

- 2021 current provision. The number of units for that type of specialised housing/accommodation, using 2019 data from the Elderly Accommodation Counsel (from tables 6 and 7).
- 2021 prevalence rate. The prevalence rate is the number of housing units/beds per 1,000 older people¹⁸, based on population data from the ONS subnational population projections for England, local population projections for Richmond¹⁹ and the Elderly Accommodation Counsel's 2019-based specialised housing data (for units/beds).
- 2039 prevalence rate. An estimate of the likely future need (expressed as a prevalence rate) based on the considerations and assumptions that are set out in paragraphs 3.03-3.12.
- 2039 estimated need. An estimate of the number of units/bedspaces of specialised housing and accommodation for older people that will be needed, based on estimated prevalence rates for 2039 and the applicable projected 65+ or 75+ population for 2039.
- Net need. A calculation of the additional number of units/bedspaces that are estimated to be required by 2039, in order to meet the estimated need for that type of specialised housing/accommodation for older people. It is the 2039 estimated need minus the 2021 current provision.

¹⁸ Population 65+ for specialised housing for older people; population 75+ for housing with care and residential/nursing care

¹⁹ Population projections; data supplied by Icen/London Borough of Richmond

Table 12. Estimated need (units/bedspaces) for specialised housing and accommodation for older people in Richmond upon Thames to 2039

Housing/accommodation type	Current provision (units / beds)	Current prevalence rate	2039 anticipated need (prevalence rate)	2039 estimated need	Net need (units/bedspaces)
Housing for Older People (units)	1,323	41	49	2,396	1,073
Housing with Care (units)	66	4	20	484	418
Residential care (bedspaces)	343	23	20	484	141
Nursing care (bedspaces)	468	31	31	750	282

3.14 The estimated total need for housing and accommodation for older people is shown disaggregated for 2025, 2030, 2035 and 2039 in table 18. Net need is not cumulative.

Table 13. Estimated total need (units/bedspaces) for specialised older people's housing and accommodation to 2039

Housing / accommodation type	2025	2030	2035	2039
Housing for Older People (units)	1,519	1,812	2,116	2,396
Housing with Care (units)	169	264	406	484
Residential care (bedspaces)	390	419	451	484
Nursing care (bedspaces)	548	608	675	750

3.15 The estimated net need for housing and accommodation for older people is shown disaggregated for 2025, 2030, 2035 and 2039 with a suggested tenure split of need for specialised housing for older people and housing with care in table 14. Net need is not cumulative. By way of comparison, the previous London wide estimate of need for specialised housing for older people from 2017 (paragraph 1.04) suggested a need of 135 units per year to 2029 for Richmond. This housing need assessment, which is based on local evidence in Richmond, suggests (to 2030) a net need (for housing for older people and housing with care) of c.75 units per year (it is not clear whether the 2017 estimates are gross or net).

Table 14. Estimated net need (units/bedspaces) for specialised older people's housing and accommodation to 2039, by tenure

Housing / accommodation type	2025	2030	2035	2039
Housing for Older People (units)	196	489	793	1,073
<i>For rent</i>	49	122	198	268
<i>For sale / shared ownership</i>	147	366	595	805
Housing with Care (units)	103	198	340	418
<i>For rent</i>	51	99	170	209
<i>For sale / shared ownership</i>	51	99	170	209
Residential care (bedspaces)	47	76	108	141
Nursing care (bedspaces)	80	140	207	282

NB. Figures may not sum due to rounding

3.16 In summary, the estimated specialised housing/accommodation for older people net need requirements for Richmond to 2039 are shown in table 15.

Table 15. Specialised housing and accommodation for older people, estimated net need to 2039 (units/bedspaces)

Housing/accommodation type	Number of units/bedspaces
Housing for older people (retirement and contemporary 'sheltered housing').	c.1,070 units: <ul style="list-style-type: none"> • c.800 for sale • c.270 for social/affordable rent
Housing with care (extra care housing).	c.420 units: <ul style="list-style-type: none"> • c.210 for sale • c.210 for social/affordable rent
Residential care.	c.140 bedspaces
Nursing care.	c.280 bedspaces

4. Findings

- 4.01 The findings from this assessment of estimated need for specialised housing and accommodation for older people in Richmond upon Thames to 2039 are summarised.
- 4.02 **Housing for older people** (retirement housing and contemporary 'sheltered housing'). The estimated net need for specialised housing for older people to 2039 is c.1,070 units of which c.800 for sale and c.270 for social/affordable rent. Based on the evidence from qualitative and quantitative research the Housing LIN has conducted with over 1,000 people aged over 55 over the last three years (paragraph 3.08) it is assumed that up to 50% of this estimated need could be met through the provision of mainstream housing. This is housing that is designed for and accessible to older people even if it is not technically 'designated' for older people, for example housing that is 'care ready' and suited to ageing as distinct from 'retirement housing'. This would mean that net need for specialised housing for older people to 2039 is c.535 units.
- 4.03 **Housing with care** (extra care housing). The estimated housing with care net need to 2039 is c.420 units of which c.210 for social/affordable rent and c.210 for sale. This will meet the housing and care needs of older people who are self-funders as well as older people who need rented accommodation and may be eligible for care funding from the Council. A component of the need for social rented extra care housing is likely to come from the Council's policy intent to offer extra care housing as an alternative to residential care for some older people.
- 4.04 **Residential care**. The estimated residential care net need to 2039 is c.140 bedspaces, for self funders and Council funded placements. It is possible that as a result of the Covid-19 pandemic some residential care home operators may exit the market. Based on the evidence of dementia prevalence amongst the older population, it is assumed that up to 50% of unmet need will be for dementia related needs.
- 4.05 **Nursing care**. The estimated nursing care net need to 2039 is c.280 bedspaces, for self funders and Council funded placements. This reflects the relative undersupply of nursing care need capacity currently in Richmond, the projected significant increase to 2039 in the over-75 population and the increasing number of older people with dementia related needs. Based on the evidence of dementia prevalence amongst the older population, it is assumed that up to 50% of unmet need will be for dementia related needs.